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APPLICANTS

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**** CONTINUING DATA *******
None NL
**** FOREIGN APPLICATIONS *******
None NL
IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

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**** SMALL ENTITY ****

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IRELAND	SHEETS DRAWING 7	TOTAL CLAIMS <i>X2 19</i>	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	<i>M. Michaelis</i> <i>M.L.</i> Examiner's Signature Initials				

ADDRESS

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TITLE

System and method for exporting formatted transactional data from a database system

FILING FEE RECEIVED 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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